



TOWN OF WESTFORD
BOARD OF HEALTH
TOWN HALL
WESTFORD, MASSACHUSETTS 01886
Phone: 978-692-5509 Fax: 978-399-2558

Application for a Permit to Operate a Mobile Food Vehicle or Pushcart \$75.00

Business/Organization Name: _____

Base of Operation: _____ Emergency Daytime Telephone #: _____

Verification Letter from Licensed Commissary or Establishment: Y N (Submit Copy)

Name of Owner: _____ Signature of Owner: _____

Address _____ Phone _____

Make & Year of Vehicle _____ State of Registration _____ Registration _____

Do you sell milk or cream? Y N

You must include a route and locations throughout the town, and a list of the handwash and toilet facilities available on each route (you may need a separate sheet of paper).

List **ALL** food and beverages to be served, including source of food and brand names (you may need a separate sheet of paper)

How do you propose to hold cold potentially hazardous foods below 45°F?

How do you propose to hold hot potentially hazardous foods above 140°F?

How do you propose to keep raw foods separate from ready-to-eat foods?

Social Sec #/Federal ID #

Signature of Applicant

Date